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ABSTRACT

Guidelines for teaching nursing skills to allied health personnel at different levels (on-the-job training, associate degree in nursing, adult education, or staff development programs) are the focus of the document. It presents general considerations for planning an effective management system for the utilization of Level 1 (entry-level nursing skills) nursing instructional units. The scheduling and procedure for a suggested system of implementing individualized instruction in a classroom setting is briefly described as well as general instructions for the faculty on the administration of the performance tests. The teacher's guide is to be used and correlated with Volume 2 of the text on Nursing Skills for Allied Health Services. Each unit includes information on the target group, prerequisites for the unit, audiovisual aids, and reference. A 51-page section contains a performance checklist for each of the 16 units in Volume 2 of the two-volume set. (EC)

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Teacher's Guide
for use with

Nursing Skills for Allied Health Services

Volume One

Edited by LUCILE A. WOOD, R.N., M.S.

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INTRODUCTION

The Allied Health Professions Projects (AHPP), a national curriculum research and development program funded by the U.S. Office of Education, initiated operations on a four-year grant in August of 1968 as part of UCLA's Division of Vocational Education. Curricula and instructional materials of a unique and innovative nature for use in training a variety of allied health personnel are currently being developed by AHPP. These materials are being created specifically for allied health functions that can appropriately be taught in educational programs from on-the-job training up through the Associate degree level. Some can also be used for adult education and staff development programs.

The basic methodology of AHPP may be summarized as follows. After extensive FIELD AND LIBRARY RESEARCH, the results were filtered through the occupational National Technical Advisory Committee to form a TASK LIST of all identifiable tasks and functions for each occupation. Data about each of the tasks in the list were obtained from a NATIONAL SURVEY; these data were analyzed and published in a report. From the TASK ANALYSIS, the DESIGN OF THE INSTRUCTIONAL UNIT was developed. This includes the rationale for the overall teaching strategy, specification of teaching objectives, and division into modules and units of instruction. AHPP defines module as a basic, self-contained instructional package. A unit of instruction is composed of one or more modules which have close content similarities; e.g., Handwashing is complete by itself, whereas Urine Elimination is a unit that encompasses 16 modules.

After the first draft of the teaching materials was completed, the units were field-tested locally. Comments and suggestions from students and faculties were then incorporated in subsequent revisions.

The final revision was completed after receiving recommendations from the Nursing National Technical Advisory Committee.

The curriculum is established as an open-entry/open-exit plan, thereby enabling optimal use of faculty, educational materials, and instructional clinic settings. In preparing the instructional modules, an effort has been made to be innovative while providing a sound educational basis for this program. AHPP has endeavored to simplify (but not water down) content and implementation by:

1. Designating the skill (activity or task) to be learned.

2. Subdividing the skill into major steps to be learned.

3. Supporting the practical content with related theory which will clarify the major steps, e.g., factors which make or break the successful attainment of the skill: safety precautions; points for making the step easier to do (special timing, special handling or positioning, special sequence of action); related biological concepts or principles of microbiology, where applicable; communication and human relations skills needed for successful completion of the activity; and pertinent ethical or legal concepts.

4. Planning the learning sequence.

    a. Demonstration or film introducing the unit.

    b. Study of the Instructional Unit, followed by written post-test (no grade).

c. Practice in the learning lab and taking performance examinations (pass/fail). In some instances the performance examinations may include a time element to assist in helping the student work efficiently.

d. Supervised clinical practice with periodic evaluation checks.

NOTE: Various combinations of audiovisual/tutorial aids may be utilized. The intent is to provide alternative media and suggestions which will enable the users to adapt these materials to their present systems.

It was the objective of the consultant writers to incorporate content to assure that the learner attains knowledge, skills, and a change of attitude at the performance level designated by the Instructional Module.

Learning is an active process, and therefore the student must be "actively doing" during his hours of instruction. The instructor functions chiefly to facilitate learning.

As the entire Project progresses, the respective Associate Directors are finding that certain Instructional Units are "common core units" which can be used in any one or all of the allied health occupations. An overall curriculum design can thus become dynamic and open-ended, permitting the learner to go in any one of a variety of directions (horizontal, vertical, or a combination of both) as desired. Workers will, it is hoped, be retained in the health field because they will no longer find themselves in self-limiting or dead-end occupations.

Component modules may be used in several settings: acute care facilities, extended-care facilities (ECF), home health agencies, agency in-service programs, adult educational programs, vocational and Associate degree and diploma nursing programs. Because these modules may be used in various settings, it is believed that a certain standardization of practice may occur. The specific sequencing of content will remain within the purview of the respective instructors on the faculty.

For the nursing curricula, the levels of learning are labeled as follows:

Level I - entry-level nursing skills
Level II - comparable to present LVN (LPN) curricula
Level III - comparable to present RN curricula

The learner begins at Level I and progresses through Level II and Level III. In other words, each level builds on the knowledge and skills learned in the previous level.

The continuing career ladder concept may be envisioned in the following broad interpretation for future development.

Level IV - comparable to present Baccalaureate degree in nursing
Level V - comparable to present Master's degree in nursing
Level VI - comparable to present Ph.D. in nursing

AHPP has developed an evaluation design which will permit assessment of the instructional materials and provide a description of selected student demographic data. Results of the evaluation data will be analyzed and reported in subsequent AHPP publications.

GENERAL CONSIDERATIONS FOR PLANNING
AN EFFECTIVE MANAGEMENT SYSTEM
FOR UTILIZATION OF LEVEL I
NURSING INSTRUCTIONAL UNITS

A. An effective management system depends on adequate data information, and on student activity management.

B. Data are supplied for four purposes:

1. To provide the instructors with information about individual student progress.

2. To provide the instructors with information about the total group progress.

3. To provide each student with information about his or her progress.

4. To provide demographic profile data about students in courses.

C. Student activities should be based on these principles:

1. Maximum time for one activity:

Short instruction periods are preferable to lengthy periods in order to hold student attention.

2. Varied activities:

Plan group as well as individual activities, such as auto-instruction, lectures, lab work, counseling seminars, gripe sessions, etc.

D. Essentials for maintaining data (useful for planning subsequent programs):

1. Student information:

a. Individual Progress Form includes time spent to complete each module and student's comments (see Form I, page 5).

b. Group Progress Form (see Form II, page 6).

These charts are kept at the instructor's desk. The students write in their own completion time for each category in each unit or module.

c. Individual student folder contains:

1) All personal data.

2) All collected data such as individual progress forms, tests, quizzes, instructor's comments, etc.

This is an OPEN FILE; i.e., the student can see it at any time.

2. Instructional content data:

Instructional Deficiency Report Form (see Form III, page 7). This is to be filled out by the instructor when any problems arise relative to content or instruction, to provide a method for improving the instruction and instructional units.

E. Suggestions to instructor(s):

1. Make a TIME TABLE covering all activities for a certain time segment.

2. Provide self-selected ENRICHMENT ACTIVITIES for quick students, to include: ADVANCED WORK, reading, helping others, and special units.

3. Provide a RECYCLE for slow students; i.e., allow extra time for a module. Slow students can go back and redo it, or complete it.

4. Provide a REWARD or recognition for achievement, i.e., promotion to the next unit.

5. SUBDIVIDE CURRICULUM into lecture, auto-instruction, and group interaction.

6. Develop FLOW CHART of procedures that students must follow when entering program, activities, and learning schedule.

7. Give student a WEEK'S ACTIVITIES IN ADVANCE (or up to first stopping point).

8. Hold DAILY GROUP MEETINGS with students to plan each day's activities.

   a. Announce lectures.

   b. Each student should plan his own schedule for that day.

   c. Student's clinical experiences.

9. Bring students together at END OF DAY to discuss next day's plan, problems, etc.

10. Plan a TIME TABLE by Unit of Instruction, outlining the laboratory and audiovisual aids, the time needed for Performance Tests, and the expected instruction time required.

NOTE: Revisions of the planning system are continually in process. Suggestions presented here are just that--suggestions to be utilized if applicable to your setting.

FORM I

NAME:

TITLE OF UNIT OR MODULE	TIME BEGUN (Date & Hour)	TIME COMPLETED (Date & Hour)	TOTAL INSTRUCTION TIME (In Minutes)	POST-TEST COMPLETED (Instructor's Initials)	PERFORMANCE (Instructor's Initials)	STUDENT'S COMMENTS

AHPP 10/70

FORM II

TOTAL STUDENT TIME = INSTRUCTION + TESTING

TITLE OF UNIT OR MODULE	TIME	STUDENTS	AVERAGE TIME
	Reading Time		
	Post-test Grade		
	Performance Time		
	Reading Time		
	Post-test Grade		
	Performance Time		
	Reading Time		
	Post-test Grade		
	Performance Time		
	Reading Time		
	Post-test Grade		
	Performance Time		
	Reading Time		
	Post-test Grade		
	Performance Time		
	Reading Time		
	Post-test Grade		
	Performance Time		

AHPP 10/71

FORM III

INSTRUCTIONAL DEFICIENCY REPORT FORM

Title of Unit: _____

Title of Module: _____

Description of Deficiency:

Action Taken:

_____
Instructor

AHPP 10/71

FORM IV

STUDENT DEMOGRAPHIC PROFILE

Name				
Age				
Sex				
Name and Location of High School Graduated From				
Class Standing (GPA)				
Occupation of Father, Husband or Self				
Salary if known				
Score on WRAT				
Score on SCAT				
Other Tests Used (Name/Score)				
Other Information, College Completed, etc.				
Date Completed Program				
Withdrew Date, Reason				

A SUGGESTED SYSTEM FOR IMPLEMENTING INDIVIDUALIZED INSTRUCTION IN A CLASSROOM SETTING

Individualized instruction allows the teacher to work with smaller groups of students than in normal classroom teaching, so that there is a more efficient use of equipment, space, and teachers. The number of groups that can be handled depends on the student-to-teacher ratio and limitations of equipment and space, but generally two groups can be handled comfortably.

A. SCHEDULING

Using a module analysis as described in Section E of "General Considerations," divide the syllabus into two parallel courses. A course could be one module long, on unit long, or several modules and units long. These are the limitations on matching courses:

1. No parallel units requiring same lab equipment.
2. No parallel units requiring same teaching equipment.
3. No parallel units requiring same supervision rating.

It is possible to match one course requiring laboratory practice with one course which requires no practice, or both courses requiring practice. Little is gained by matching two entirely theoretical courses.

Provide enrichment or alternative assignments for the fast-progressing students to permit the slower students to catch up. Then at pre-planned intervals bring the entire group together for group discussion to share their individual learning experiences; i.e., daily after clinical experience.

B. PROCEDURE

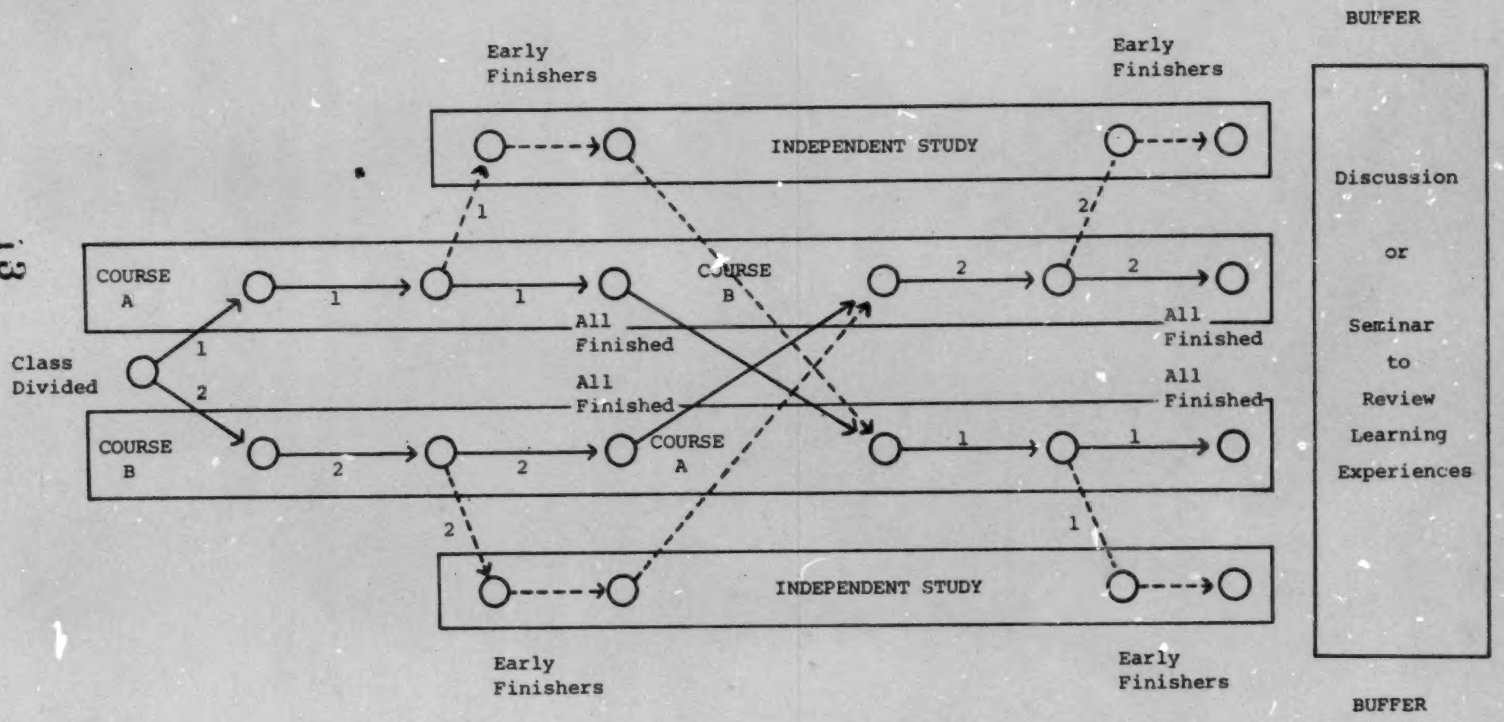
Assume two parallel courses, A and B. Split the class into two groups, 1 and 2.

Class 1 works on course A to buffer,* then on B
Class 2 works on course B to buffer, then on A
Then REVIEW both courses

*"Slack" time for independent study.

See model on the following page for an example of the system in operation.

MODEL TO SHOW OPERATION OF SYSTEM WITH
TWO PARALLEL COURSES, COURSE A AND COURSE B



GENERAL INSTRUCTIONS FOR THE FACULTY
ON ADMINISTRATION OF PERFORMANCE TESTS

The directions for administration of each performance test should be followed as closely as possible so that a standard set of conditions is maintained for all occasions on which a particular test is given. The directions are designed to make the test conditions similar to those that the student will encounter on the job. Most of the tests, therefore, are arranged so as to require the student to make the appropriate preparations for performance (which may include locating and assembling the correct equipment) and to complete the necessary follow-up activities after performance of the basic task.

An itemized performance checklist has been provided for each performance test. The checklist items have been arranged in the order in which observations of the activities probably would be made. Some items, however, will depend more on observation of the entire procedure than on observation at any one specific point.

The observer should indicate his rating of the student's performance on each item by checking one of the four columns.

COLUMN 1 Yes: the student correctly performed as required by the item.

COLUMN 2 No: the student did not perform correctly, or failed to perform when he should have done so.

COLUMN 3 Not Applicable: the activity was not performed because it was not appropriate in the circumstances.

COLUMN 4 Not Observed: the observer was unable to observe the student's performance, or he was unable to judge whether or not the student's performance was correct.

The last item on the checklist requests the observer's judgment of the student's overall performance of the procedure as a whole. The definitions of the categories are:

a) Satisfactory: (Pass) the student has been properly trained so that he knows what to do and how to do it, and with further practice he should have no difficulty in attaining the required level of proficiency.

b) Unsatisfactory: (Fail) the student's overall performance is clearly deficient, and indicates that his understanding has not been adequate.

Space has been provided for comments if the observer wishes to qualify any of his ratings. If the observer judges that there was an error or a deficiency in some aspect of the student's performance that is not covered in the checklist, he should indicate in this space what it was.

The student should be allowed to continue through the test without guidance or correction from the observer. However, if the student is unable to continue, or if the observer considers that his performance might cause harm to the patient, the test may be stopped and the student given an overall rating of "unsatisfactory." The student will then return to the skill lab for further practice, or may be counselled and asked to withdraw from the program because of consistently unsatisfactory performance.

GENERAL INSTRUCTIONS TO STUDENTS TAKING PERFORMANCE TESTS

To test your ability to apply the skills that you have learned, you will be asked to perform various tasks under conditions similar to those you would find on the job in a hospital. When you take these tests, remember that preparation and follow-up may be as necessary as "doing" the procedure. You should do all the things that you would do if you were performing the tasks on the job, and you should use the techniques that you would employ if you were on the job in a health agency.

Listen to and/or read the test instructions carefully. Recall what it is you need to perform the task. The items you will need will be available, but you may have to pick them out yourself. Recall what the proper techniques are. If the instructions say anything about the circumstances or the condition of the patient, consider how this may affect the way in which you perform the task. Make sure that you do not omit any of the necessary steps in performance of a task. Before you indicate to the instructor that you have finished, ask yourself if you have completed all the follow-up activities that normally would be necessary if you were actually on the job.

Some of the tests may have time limits, because on the job you would be expected to practice economy of time as far as it is consistent with effective performance of your duties. The time limits are reasonable ones. They are not set with the intention of seeing how fast you can perform a task, but only to check your ability to perform efficiently. Exceeding the time limit will lower your total score, but it will not cause you to fail the test as long as your performance is satisfactory in other respects.

THE HEALTH WORKER AND THE LAW

Target Group: any health worker.

Prerequisites for this Unit: none.

Performance Checklist: none.

Audiovisual Aids:

"Nursing and the Law." (14 pre-recorded seminar sessions on cassette tapes.) Grace C. Barbee, 10 Buckeye Ave., Oakland, California 94618.

"No Margin for Error." (On identification bands.)
"Better up than Sorry," filmstrip on bedrail safety.
American Hospital Association, Chicago, Illinois 60611.

References:

Becker, Betty Glore and Sister Ruth Ann Hassler. Vocational and Personal Adjustments in Practical Nursing. St. Louis: C. V. Mosby Co., 1970.

Bernzweig, Eli P. Nurse's Liability for Malpractice. New York: McGraw-Hill Book Co., The Blakistan Division, 1969.

Cady, E. L. Jr. Law and Contemporary Nursing. Patterson, New Jersey: Littlefield Adams and Co., 1971.

Creighton, Helen. Law Every Nurse Should Know. Philadelphia: W. B. Saunders Co., 1970.

Hamilton, H. D. "Legal Aspects: You and the L.P.N." RN, Vol. 71, No. 1 (January 1971), pp. 50-59.

Hershey, Nathan. "Prudence and the Coffee Break," American Journal of Nursing, Vol. 70, No. 11 (November 1970), p. 2389.

Murchison, Irene A. and Thomas S. Nichols. Legal Foundations of Nursing Practice. Riverside, New Jersey: The MacMillan Co., 1970.

Naugle, Ethel H. "Knock and Wait," American Journal of Nursing, Vol. 71, No. 2 (February 1971), pp. 311-13.

Sarner, Harvey. The Nurse and the Law. Philadelphia: W. B. Saunders Co., 1968.

Springer, Eric W. (Editor, Health Law Center) Nursing and the Law. Pittsburgh: Aspen Systems Corporation, 1970.

Willig, Sidney. The Nurse's Guide to the Law. New York: McGraw-Hill Book Co., 1970.

INTRODUCTION TO ETHICS IN THE HEALING ARTS

Target Group: any health worker.

Prerequisites for this Unit: none.

Performance Checklist: none.

References:

Conway, Barbara, Barbara Mandelco, Judith Trufant and Mary Scoblis. "The Seventh Right," American Journal of Nursing, Vol. 70, No. 5 (May 1970), pp. 1040-44.

Deutsch, Elizabeth B. "A Stereotype - or an Individual?" Nursing Outlook, Vol. 71, No. 2 (February 1971), pp. 106-8.

Drage, Elaine and Blanche Lange. "Ethical Considerations in the Use of Patients for Demonstration," American Journal of Nursing, Vol. 69, No. 11 (November 1969), pp. 2161-65.

Fitch, Grace E. The Role and Responsibilities of the Nurse, New York: The MacMillan Co., 1969.

Geatch, Barbara. "Gifts and Their Significance," American Journal of Nursing, Vol. 71, No. 2 (February 1971), pp. 266-70.

Giffin, Kim. "Interpersonal Trust in the Helping Professions," American Journal of Nursing, Vol. 69, No. 7 (July 1969), pp. 1491-93.

Goldsborough, Judith D. "On Becoming Nonjudgmental," American Journal of Nursing, Vol. 70, No. 11 (November 1970), pp. 2340-43.

Lazar, Sally. "One Answer: To Teach the Beauty of Difference," American Journal of Nursing, Vol. 70, No. 9 (September 1970), pp. 1934-35.

Poland, Marilyn, Nellie English, Nanny Thornton, and Donna Owens. "PETO - A System of Assessment," American Journal of Nursing, Vol. 70, No. 5 (May 1970), pp. 1040-44.

Robinson, Vera M. "Humor in Nursing," American Journal of Nursing, Vol. 70, No. 5 (May 1970), pp. 1065-69.

Spaulding, Pearl. "My Enigma: Children and Questions of Race," American Journal of Nursing, Vol. 70, No. 2 (February 1970), pp. 304-05.

Velasquez, Janet. "Alienation," American Journal of Nursing, Vol. 69, No. 2 (February 1969), pp. 301-05.

ENVIRONMENT AND THE PATIENT

Target Group:

Any beginning health worker who is responsible for the environment of the patient.

Prerequisites for this Unit:

The Health Worker and the Law and Introduction to Ethics in the Healing Arts.

Performance Checklist: none.

References:

Connolly, Arlene F. and Valentina Fischer. Promotion of Physical Comfort and Safety, Dubuque, Iowa: Wm. C. Brown Co., 1970.

Francis, Gloria M. and Barbara A. Munjas. Promotion of Psychological Comfort, Dubuque, Iowa: Wm. C. Brown Co., 1968.

Hahn, Aloyse. "It's Tough to be Old," American Journal of Nursing, Vol. 70, No. 8 (August 1970), pp. 1698-99.

Jodais, Janet. Personal Care of Patients, Philadelphia: W. B. Saunders Co., 1970, pp. 27-38.

GUIDELINES FOR PERFORMANCE OF NURSING SKILLS

Target Group:

Any beginning health worker who is learning how to plan, organize, and evaluate his work.

Prerequisites for this Unit:

This unit seems to work better after the students have been on a nursing unit for at least one or two experiences. If you offer the unit in the first week, it should be repeated as a supplemental unit later in the program after the student has had some clinical experience.

Performance Checklist: none.

References:

Beland, Irene L., et al. Clinical Nursing, 2nd ed. New York: The MacMillan Co., 1970, pp. 6-18.

Brunner, Lilian S., et al. Medical-Surgical Nursing, 2nd ed. Philadelphia: J. P. Lippincott Co., 1970, pp. 6-13.

Fox, Madeleine J. "Talking with Patients Who Can't Answer," American Journal of Nursing, Vol. 71, No. 6 (June 1971), pp. 1146-49.

Johnson, Mae M., Mary Lou C. Davis, and Mary Jo Bilitch. Problem Solving in Nursing Practice, (Foundations of Nursing Series), Dubuque, Iowa: Wm. C. Brown, Co., 1970.

Murphy, Juanita. "The Nub of the Learning Process," American Journal of Nursing, Vol. 71, No. 2 (February 1971), pp. 306-10.

BODY ALIGNMENT, BALANCE AND MOVEMENT FOR HEALTH WORKERS, PART I

Target Group: any health worker.

Prerequisites for this Unit: none.

Performance Checklist: see page 29.

Audiovisual Aids:

101. "Elementary Body Mechanics." Health Employees Training Program, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

T-0100. "An Introduction to Posture."
T-0101. "Alignment - Prevention of Contractures."
T-0102. "Principles of Body Alignment."
T-0103. "Applying the Principles of Body Mechanics."
Train-Aide, Glendale, California 91201.

N-1-3. "Body Alignment, Balance and Movement for Health Workers, Part I." Mt. San Jacinto College, Gilman Hot Springs, California 92340.

"Moving in Bed." American Journal of Nursing Co., Educational Services Division, Visual Information Systems Center for Videotape, 15 Columbus Circle, New York, New York 10023.

References:

In addition to reading from the following bibliography, you might look up in any standard textbook on physics the subjects of inertia, momentum and levers.

Bowen, Eleanor Page. Biology of Human Behavior, New York: Appleton-Century-Crofts, 1968, pp. 207-14.

Kerr, Avice. Orthopedic Nursing Procedures, 2nd ed. New York: Springer Publishing Co., 1969, pp. 9-12, 16, 17, 23-38.

Larson, Carroll B. and Marjorie Gould. Orthopedic Nursing, 7th ed. St. Louis: The C. V. Mosby Co., 1970.

Levine, Myra Estrin. Introduction to Clinical Nursing, Philadelphia: F. A. Davis Co., 1969, pp. 72-78.

BODY ALIGNMENT, BALANCE AND MOVEMENT FOR HEALTH WORKERS, PART II

Target Group: any health worker.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Part I.

Performance Checklist: see page 31.

Audiovisual Aids:

N-1-4. "Body Alignment, Balance and Movement for Health Workers, Part II." Mt. San Jacinto College, Gilman hot Springs, California 92340.

T-0100. "An Introduction to Posture."
T-0102. "Principles of Body Mechanics."
T-0103. "Applying Principles of Body Mechanics."
Train-Aide, Glendale, California 91201.

"Oh, My Aching Back!" American Hospital Association, Chicago, Illinois 60611.

References:

Bowen, Eleanor Page. Biology of Human Behavior, New York: Appleton-Century-Crofts, 1968, pp. 207-17.

Kerr, Avice. Orthopedic Nursing Procedures, 2nd ed. New York: Springer Publishing Co., Inc., 1969, pp. 9-12, 16-17, 23-38.

Levine, Myra Estrin. Introduction to Clinical Nursing, Philadelphia: F. A. Davis Co., 1969, pp. 72-78.

INTRODUCTION TO CHARTING

Target Group:

Beginning health workers who will be recording on patient charts.

Prerequisites for this Unit: none.

Performance Checklist: none.

Audiovisual Aids:

PC-181. "Maintaining the Patient's Chart." Trainex Corporation, Garden Grove, California 92642.

T-0304. "The Patient's Chart."
T-0306. "Medical Terminology and Abbreviations."
Train-Aide, Glendale, California 91201.

References:

Caldwell, Esther and Barbara R. Hegner. Health Assistant, Albany, New York: Delmar Publishers, 1969, pp. 120-32.

Price, Alice L. Handbook and Charting Manual for Student Nurses, 5th ed. St. Louis: C. V. Mosby Co., 1971.

Tross, Verlee E. Mastering Medical Terminology, 2nd ed. North Hollywood: Halls of Ivy Press, 1969.

Young, Clara Gene and James D. Barger. Learning Medical Terminology Step by Step, 2nd ed., St. Louis: C. V. Mosby Co., 1971.

Suggested Supplementary Materials for this Unit:

Samples of your agency's chart forms.
Prepare sample charting (on your own forms) for use with the Charting Worksheet (Parts I, II and III).

HANDWASHING TECHNIQUE FOR MEDICAL ASEPSIS

Target Group: all health workers.

Prerequisites for this Unit: none.

Performance Checklists: see page 35.

Audiovisual Aids:

"Body Defenses Against Disease." Pennsylvania State University.

"Handwashing Procedures." Health Employees Learning Programs, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

"Hospital Sepsis." ANA and NLN Film Library. (Also available through some local Public Health Departments.)

"Medical Asepsis." BN-110. Trainex Corporation, Garden Grove, California 94642.

"Skin Antiseptics." Iodine Educational Bureau, New York.

"The Role of Nursing in Infection Control." ANA and NLN Film Library, New York.

"Epidemiology of Staphylococcal Infections." U.S. Public Health Service, Communicable Disease Center, Chambles, Georgia.

References:

Donovan, Joan, Edith Belsjoe and Daniel Dillon. The Nurse Aide, New York: McGraw-Hill Book Co., 1968, pp. 37-38.

Knoedler, Evelyn L. The Nurse Assistant, New York: Delmar Publishers, Inc., 1968, p. 31.

Leake, Mary J. A Manual of Simple Nursing Procedures, Philadelphia: W. B. Saunders Co., 1971, pp. 10-13.

Rasmussen, Sandra. Foundations of Practical and Vocational Nursing, New York: The MacMillan Co., 1967, p. 71.

U.S. Department of Health, Education and Welfare. Isolation Techniques for Use in Hospitals, P.H.S. No. 2054, U.S. Government Printing Office, 1970.

MAKING HOSPITAL BEDS

Target Group: Any health worker assigned to make beds.

Prerequisites for this Unit:

Handwashing Technique for Medical Asepsis and Body Alignment, Balance and Movement for Health Workers, Parts I and II.

Performance Checklist: see page 36.

Audiovisual Aids:

BN-104. "Occupied Bed-Making." Trainex Corporation, Garden Grove, California 92642.

"Bed Care: Bedmaking with Clean Linen I."
"Bed Care: Bedmaking with Clean Linen II."
Encyclopedia Britannica Education Corporation, San Leandro, California.

204. "Hospital Beds - Variable Heights."
205. "Making the Unoccupied Bed."
206. "Making the Surgical (Post-Operative) Bed."
207. "Use of Siderails."
Health Employees Learning Program, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

References:

Being a Nurse Aide. Hospital Research and Education Trust, Chicago, Illinois, 1969, pp. 5-9 and 15-21.

Chirco, Inice. Nursing Manual, Rio Hondo College Book Store, Whittier, California; Mimeographed, 1969.

Donovan, Joan, Edith Belsjoe, and Daniel Dillon. The Nurse Aide, New York: McGraw-Hill Book Co., 1968, pp. 48-83.

Flores, Angeles M. and Lenore R. Zohman. "Energy Cost of Bedmaking to the Cardiac Patient and the Nurse," American Journal of Nursing, Vol. 70, No. 6 (June 1970), pp. 1264-67.

Jodais, Janet. Personal Care of Patients, Philadelphia: W. B. Saunders Co., 1970, pp. 65-77.

Leake, Mary J. A Manual of Simple Nursing Procedures, Philadelphia: W. B. Saunders Co., 1971, pp. 22-32.

Knoedler, Evelyn L. The Nurse Assistant, New York: Delmar Publishers, Inc., 1968, pp. 3-8.

ASSISTING THE PATIENT TO DRESS AND UNDRESS

Target Group:

All health workers who are giving direct care to patients in the home, extended care facility, or acute care facility.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Parts I and II, and Handwashing Technique for Medical Asepsis.

Performance Checklist: see page 40.

References:

Anderson, Helen C. Newton's Geriatric Nursing, 5th ed. St. Louis: The C. V. Mosby Co., 1971.

Kintzel, Kay Cormen (editor). Advanced Concepts in Clinical Nursing, Philadelphia: J. B. Lippincott Co., 1971, pp. 44-67.

BATHS

Target Group:

Student nurses, aides, orderlies, and other assigned personnel.

Prerequisites for this Unit:

Handwashing Technique for Medical Asepsis, Introduction to Charting, Making Hospital Beds, and Assisting the Patient to Dress and Undress.

Performance Checklist: see page 43

Audiovisual Aids:

"Bed Care: Bathing the Patient in Bed (I)."
"Bed Care: Bathing the Patient in Bed (II)."
"Bed Care: Oral Hygiene - The Helpless Patient."
"Bed Care: Oral Hygiene - The Patient Who Can Help."
"Bed Care: Lifting and Moving the Patient in Bed."
Encyclopedia Britannica, Education Corporation, 2494 Teagarden Street, San Leandro, California 94577.

BN-111. "Personal Care in Long-Term Illness."
BN-122. "Showers and Tub Baths."
BN-103. "Bed Bath."
BN-109. "Lifting and Moving Patients."
BN-119. "Observation and Charting."
Trainex Corporation, Garden Grove, California 92642.

113. "Giving a Bedpan or Urinal."
116. "Bed Bath: Emotional Support."
117. "Bed Bath: Procedure."
126. "The Skin: Its Function and Care."
Health Employees Learning Program, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

References:

Chirco, Inice. Nursing Manual, Rio Hondo College Book Store, Whittier, California; Mimeographed, 1969, pp. 22-29.

Davis, Ellen D. "Give a Bath?" American Journal of Nursing, Vol. 70, No. 11 (November 1970), pp. 2366-67.

Donovan, Joan, Edith Belsjoe, and Daniel Dillon. The Nurse Aide, New York: McGraw-Hill Book Co., 1968, pp. 84-110.

Klein, Sr. M. Amadeus. "Understanding the Aged: A Basis for Nursing Care," Hospital Progress, Vol. 50, No. 6 (June 1969), pp. 106, 110, 114, 116, and 117.

Schmieding, Norma Jean. "Relationship of Nursing to the Process of Chronicity," Nursing Outlook, Vol. 18, No. 2 (February 1970), pp. 58-62.

CARE OF THE HAIR

Target Group:

Any health worker who is involved in the bedside care of a person hospitalized in an extended care facility or in the home.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Parts I and II, and Handwashing Technique for Medical Asepsis.

Performance Checklist: see page 47.

References:

Caldwell, Esther and Barbara Hegner. Health Assistant, Albany, New York: Delmar Publishers, Inc., 1969, p. 59.

Hoffman, Claire P, Gladys B. Lipkin, and Ella M. Thompson. Simplified Nursing, 8th ed. Philadelphia: J. B. Lippincott Co., 1968, pp. 213-16.

Leake, Mary J. A Manual of Simple Nursing Procedures, Philadelphia: W. B. Saunders Co., 1971, pp. 43 and 56-58.

SPECIAL SKIN CARE

Target Group:

All Health Workers who are involved in bedside care of individuals who are hospitalized in extended care facilities or at home.

Prerequisites for this Unit:

Baths; Handwashing Technique for Medical Asepsis; and Body Alignment, Balance and Movement for Health Workers, Parts I and II.

Performance Checklist: see page 52.

Audiovisual Aids:

BN-111. "Personal Care in Long-Term Illness."
SN-148. "Care of the Patient in Traction."
SN-152. "Care of the Patient in a Cast."
Trainex Corporation, Garden Grove, California 92642.

T-0110. "Prevention and Treatment of Decubitus Ulcers."
T-0111. "Specific Treatment of Decubitus Ulcers."
T-0116. "Preventive Nursing Care for the Patient in a Cast."
T-0115. "The Patient in Traction."
Train-Aide, Glendale, California 91201.

114. "Care and Prvention of Decubiti."
126. "The Skin: Its Function and Care."
Health Employees Training Program, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

"Ileostomy and Ileal Bladder Management," by Patricia Feltz Cohen and Elizabeth W. Seals, from the Academic Communications Facility, University of California, Los Angeles.

References:

Bailey II, Joseph A. "Tractions, Suspensions, and a Ringless Splint," American Journal of Nursing, Vol. 70, No. 8 (August 1970), pp. 1724-25.

Blass, Mary A. "Improvised Cushions," American Journal of Nursing, Vol. 70, No. 12 (December 1970), p. 2605.

Brownlowe, Miriam A., Florence R. Cohen, and William F. Happich. "New Washable Woolskins," American Journal of Nursing, Vol. 70, No. 11 (November 1970), pp. 2368-70.

Horowicz, Clara. "Profiles in OPD Nursing (A Rectal and Colon Service)," American Journal of Nursing, Vol. 71, No. 1 (January 1971), pp. 114-16.

Ileostomy and Ileal Bladder Information. Published by Ileostomy Association of Los Angeles, 1971, p. 5.

Kozier, Barbara Blackwood and Beverly Witter Du Gas. Fundamentals of Patient Care, Philadelphia: W. B. Saunders Co., 1968, pp. 75-77, and 264-278.

Lennenberg, Edith and Alan M. Mendelssohn. Colostomies: A Guide, Published by United Ostomy Association, Los Angeles, 1969.

Nursing Care of the Skin. Rehabilitation Publication No. 711, American Rehabilitation Foundation, Minneapolis, 1967.

Secor, Sophia M. "Colostomy Rehabilitation," American Journal of Nursing, Vol. 70, No. 11 (November 1970), pp. 2400-01.

Sill, Alice R. "Bulb-Syringe Technique for Colonic Stoma Irrigation," American Journal of Nursing, Vol. 70, No. 5 (March 1970), pp. 536-37.

Sutton, Audrey Latshaw. Bedside Nursing Techniques, 3rd ed. Philadelphia: W. B. Saunders Co., 1969.

PATIENT MOVEMENTS AND AMBULATION

Target Group:

Any health worker who must assist the patient with movement and ambulation.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Parts I and II, and Handwashing Technique for Medical Asepsis.

Performance Checklist: see page 56.

Audiovisual Aids:

BN-114. "Transfer Activities and Ambulation."
BN-113. "Range of Joint Motion Exercises."
Trainex Corporation, Garden Grove, California 92642.

208. "Ambulating a Patient to a Chair or Wheelchair."
209. "First Time Ambulation of the Patient."
Health Employees Learning Programs, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

References:

Carnevali, Doris and Susan Brueckner. "Immobilization - Reassessment of a Concept," American Journal of Nursing, Vol. 70, No. 7 (July 1970), pp. 1502-07.

Nordmark, Madelyn T. and Anne W. Rohweder. Science Principles Applied to Nursing, Philadelphia: J. B. Lippincott Co., 1969, pp. 132-54.

Pothier, Patricia C. "Therapeutic Handling of the Severely Handicapped Child," American Journal of Nursing, Vol. 71, No. 2 (February 1971), pp. 321-24.

Smith, Dorothy W., Carol P. Hanley Germain, and Claudia D. Gips. Care of the Adult Patient, 3rd ed. Philadelphia: J. B. Lippincott Co., 1971.

Strike Back at Stroke. Chronic Disease Program, Public Health Service, U.S. Department of Health, Education and Welfare. Distributed by American Heart Association.

Yates, Judith Andre and Ann C. Lundberg. Moving and Lifting Patients; Principles and Techniques, Minneapolis: American Rehabilitation Foundation, 1970.

MECHANICAL AIDS FOR AMBULATION AND MOVEMENT

Target Group:

Any health worker who has the need to assist patients with movement and ambulation.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Parts I and II; Patient Movements and Ambulation; and Handwashing Technique for Medical Asepsis.

Performance Checklist: see page 60.

Audiovisual Aids:

BN-123. "Use of Patient Lifters."
PC-175. "Teaching Crutch Walking."
Trainex Corporation, Garden Grove, California 92642.

T-0114. "Gait Training."
T-0112. "Patient Transfers and Ambulation."
Train-Aide, Glendale, California 91201.

202. "Wheelchair Transport." Health Employees Learning Program, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

References:

Being a Nurse Aide. Hospital Research and Educational Trust, Chicago, Illinois, 1969, pp. 6-25 to 6-33.

Hoffman, Claire P., Gladys B. Lipkin, and Ella M. Thompson. Simplified Nursing, 8th ed. Philadelphia: J. B. Lippincott Co., 1968, pp. 223-36.

Martin, Nancy, Rosemarie King, and Joyce Suchinski. "The Nurse Therapist in a Rehabilitation Setting," American Journal of Nursing, Vol. 70, No. 8 (August 1970), pp. 1694-97.

Smith, Dorothy W., Carol P. Hanley Germain, and Claudia D. Gips. Care of the Adult Patient, 3rd ed. Philadelphia: J. B. Lippincott Co., 1971.

Sutton, Audrey. Bedside Nursing Techniques, 2nd ed. Philadelphia: W. B. Saunders Co., 1969, pp. 186-190, and 206.

U. S. Department of Health, Education and Welfare. Step Into Action! A Guide Book for the Above-Knee Amputee, PHS, Washington, D.C., 1963. Public Health Service Publication No. 980, pp. 41-47.

POSITIONING THE BED PATIENT

Target Group:

Any beginning health worker who works directly with patients.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Parts I and II; Special Skin Care; and Handwashing Technique for Medical Asepsis.

Performance Checklist: see page 65.

Audiovisual Aids:

201. "Moving a Patient in Bed." Health Employees Learning Program, Ro-Com, Division of Hoffman-LaRoche, Inc., Nutley, New Jersey 07110.

T-0101. "Body Mechanics: Body Alignment and Prevention of Contractures." Train-Aide, Glendale, California 91201.

BN-111. "Personal Care in Long-Term Illness, Parts I and II."
BN-112. "Positioning to Prevent Contractures."
Trainex Corporation, Garden Grove, California 92642.

References:

Hillars, Karen S. "You Have Pain? I Think this Will Help." American Journal of Nursing, Vol. 70, No. 10 (October 1970), pp. 2143-45.

Leake, Mary J. A Manual of Simple Nursing Procedures, Philadelphia: W. B. Saunders Co., 1971, pp. 81-95.

Sutton, Audrey. Bedside Nursing Techniques, 2nd ed. Philadelphia: W. B. Saunders Co., 1969, pp. 311-14.

ASSISTING WITH NUTRITION

Target Group: Any health worker who assists in feeding patients.

Prerequisites for this Unit:

Body Alignment, Balance and Movement for Health Workers, Parts I and II; Handwashing Technique for Medical Asepsis; and Positioning the Bed Patient.

Performance Checklist: see page 71.

References:

Being a Nurse Aide. Hospital Research and Educational Trust, Chicago, Illinois, 1969, pp. 8-1 to 8-24.

Blake, Florence G., Howell Wright, and Eugenia Waechter. Nursing Care of Children, 8th ed. Philadelphia: J. B. Lippincott Co., 1970.

Hoffman, Claire P., Gladys B. Lipkin, and Ella M. Thompson. Simplified Nursing, 8th ed. Philadelphia: J. B. Lippincott Co., 1968, pp. 141-65.

Ohno, Mary I. "The Eye-Patched Patient," American Journal of Nursing, Vol. 71, No. 2 (February 1971), pp. 271-74.

Robinson, Corinne H. Basic Nutrition and Diet Therapy, Riverside, New Jersey: The MacMillan Co., 1970.

Schmitt, Madeline H. "Superiority of Breast-Feeding - Fact or Fancy?" American Journal of Nursing, Vol. 70, No. 7 (July 1970), pp. 1488-93.

Smith, Dorothy W., Carol P. Hanley Germain, and Claudia D. Gips. Care of the Adult Patient, 3rd ed. Philadelphia: J. B. Lippincott Co., 1971.

Whitley, Nancy N. "Breast Feeding the Premature," American Journal of Nursing, Vol. 70, No. 9 (September 1970), p. 1909.

FLUID INTAKE AND OUTPUT

Target Group:

Any health worker who may be involved with recording of fluid intake and output.

Prerequisites for this Unit:

Assist with Nutrition, Handwashing Technique for Medical Asepsis, and Introduction to Charting.

Performance Checklist: see page 72.

Audiovisual Aids:

T-0166. "Basic Intake and Output." Train-Aide, Glendale, California 91201.

PE-173. "Intake and Output." Trainex Corporation, Garden Grove, California 92642.

References:

Armstrong, Inez L. and Jane J. Browder. The Nursing Care of Children, 3rd ed. Philadelphia: F. A. Davis Co., 1970.

Being a Nurse Aide. Hospital Research and Educational Trust, Chicago, Illinois, 1969, pp. 9-1 to 9-7.

Bergstrom, Nancy L. "Ice Application to Induce Voiding," American Journal of Nursing, Vol. 69, No. 2 (February 1969), pp. 283-85.

Hoffman, Claire P., Gladys B. Lipkin, and Ella M. Thompson. Simplified Nursing, 8th ed. Philadelphia: J. B. Lippincott Co., 1968, pp. 250-51.

Leake, Mary J. A Manual of Simple Nursing Procedures, Philadelphia: W. B. Saunders Co., 1971, pp. 64-68.

Shafer, Kathleen N., Janet R. Sawyer, Audrey M. McCluskey, Edna L. Beck, and Wilma H. Phipps. Medical-Surgical Nursing, St. Louis: C. V. Mosby Co., 1971, pp. 67-74 and 396.

Smith, Dorothy W., Carol P. Hanley Germain, and Claudia D. Gips. Care of the Adult Patient, 3rd ed. Philadelphia: J. B. Lippincott Co., 1971.

OBSERVING INTRAVENOUS THERAPY

Target Group:

Any health worker caring for a patient receiving IV therapy.

Prerequisites for this Unit:

Handwashing Technique for Medical Asepsis, The Health Worker and the Law, Baths, Assisting the Patient to Dress and Undress, Patient Movements and Ambulation, and Positioning the Bed Patient.

Performance Checklist: see page 73.

Audiovisual Aids:

T-0169. "Maintaining an IV." Train-Aide, Glendale, California 91201.

SN-144. "Nursing Care During Intravenous Therapy." Trainex Corporation, Garden Grove, California 92642.

References:

Hoffman, Claire P., Gladys B. Lipkin, and Ella M. Thompson. Simplified Nursing, 8th ed. Philadelphia: J. B. Lippincott Co., 1968, p. 342.

Jodais, Janet. Personal Care of Patients, Philadelphia: W. B. Saunders Co., 1970, pp. 268-89.

Voda, Anna M. "Body Water Dynamics - A Clinical Application," American Journal of Nursing, Vol. 70, No. 12 (December 1970), pp. 2594-2601.

ASSISTING WITH SPIRITUAL CARE

Target Group:

Any health worker who cares for patients with spiritual needs.

Prerequisites for this Unit: none.

Performance Checklist: see page 74.

Audiovisual Aids:

SN-155. "Spiritual Needs of the Patient."
BN-177. "Care of the Dying Patient."
Trainex Corporation, Garden Grove, California 92642.

References:

Hoffman, Claire P., Gladys B. Lipkin, and Ella M. Thompson. Simplified Nursing, 8th ed. Philadelphia: J. B. Lippincott Co., 1968, pp. 221-23, 321-22.

Jodais, Janet C. Personal Care of Patients, Philadelphia: W. B. Saunders Co., 1970, pp. 23, 256-70.

Moberg, David O. "Religiosity in Old Age," Middle Age and Aging. (Ed. by Bernice L. Newgarten) Chicago: The University of Chicago Press, 1968, pp. 497-508.

Naiman, Harriet L. "Nursing in Jewish Law," American Journal of Nursing, Vol. 70, No. 11 (November 1970), pp. 2378-79.

PERFORMANCE CHECKLIST

Unit: Body Alignment, Balance and Movement for Health Workers, Part I

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
DEMONSTRATION OF PROPER BODY ALIGNMENT				
1. Stood with feet in stride position, feet parallel or one slightly ahead of the other.				
2. Stood with weight evenly distributed on both feet.				
3. Stood with both knees slightly flexed.				
4. Stood with the buttocks tucked in or the pelvis tilted upward so that the spine was straight and the lumbar curve reduced.				
5. Stood with the abdominal muscles pulled up and held in.				
6. Stood with the thorax raised and the shoulders relaxed.				
7. Stood with the head balanced on top of the spine.				
DEMONSTRATED GOOD POSTURE WHILE WALKING AND WAS ABLE TO IDENTIFY MAJOR MUSCLES INVOLVED IN PRODUCING THE MOVEMENT				
1. Body was in good alignment as described in preceding skills test.				
2. Flexed the right knee.				
A. Described the movement correctly as flexion.				
B. Identified the hamstring muscles as being the prime movers.				
C. Identified the correct location of the hamstring muscles.				
3. Extended the right knee and stepped forward.				
A. Described this movement as extension.				
B. Identified the prime mover as the quadriceps group.				
C. Identified the anterior aspect of the thigh as their principle location.				
4. Shifted weight to the lead foot.				
A. Identified the movement as hip extension.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Body Alignment, Balance and Movement
Unit: for Health Workers, Part I

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Identified the gluteal muscles as the prime movers.				
C. Identified the location of the gluteal muscles.				
PERFORMED SIDEWARD STEP				
1. Body was in good alignment prior to movement being performed as per demonstration of body alignment.				
2. With left foot, took a step of 12 or more inches to the left.				
A. Described the movement as abduction.				
B. Identified the location of the abductors as being the lateral aspect of the thigh and thorax.				
3. Brought the right foot to a position parallel to the left foot.				
A. Described the movement as adduction.				
B. Identified the location of the adductors as being the medial aspect of the thigh.				
DEMONSTRATED THE FOLLOWING MOVEMENTS:				
1. Flexion of the neck.				
2. Abduction of the head.				
3. Adduction of the head.				
4. Hyperextension of the neck.				
5. Extension of the neck.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Body Alignment, Balance and Movement for Health Workers, Part II

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
STOOPING				
1. Positioned feet apart, with one foot slightly advanced.				
2. Stated that the position provides a stable base of support.				
3. Lowered the body to a stooped position:				
A. Kept the back and trunk straight.				
B. Flexed knee and hip joints.				
4. Stated that he is using thigh and leg muscles to control the action.				
5. Shifted weight to the advanced foot and the ball of the rear foot.				
6. Stated that this relieves tension on the rear foot and assists in maintaining balance.				
7. Raised the body to standing position.				
A. Kept the back straight.				
B. Initiated the move by extending hip and knee joints.				
8. Stated that the extensor muscles worked to bring the body upright.				
A. Was able to identify the location of the extensor muscles.				
B. Was able to identify the names of the extensor muscles.				
REACHING				
1. Started with stable base of support.				
2. Started the movement with body in good alignment and balance.				
3. Checked the distance to be reached in order to obtain the object.				
A. Obtained footstool for use if necessary.				
B. Secured an artificial aid in order to raise self if necessary.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Body Alignment, Balance and Movement for Health Workers, Part II

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
4. Described the correct use of a footstool.				
5. Utilized the footstool appropriately.				
A. Line of gravity centered over the center of the footstool.				
B. Feet placed in balanced position.				
6. Reached up from position directly in front of the object.				
7. Lifted the object from shelf using good alignment procedures.				
8. Lowered the object with smooth coordinated movement.				
9. Lowered himself from the ladder or footstool, if required, using good principles of body alignment.				
10. Placed the object on a shelf of working height or stooped and lowered it to floor observing good principles of body alignment.				
11. Correctly stated the rationale for using a footstool or an artificial aid for increasing his height.				
A. Avoided hyperextension of the neck.				
B. Assisted in maintaining balance.				
LIFTING AND CARRYING				
1. Started with stable base.				
2. Stated that the body should be in good alignment before the beginning of movement.				
A. Demonstrated proper body alignment. (Refer to previous checklist.)				
3. Grasped the object to be lifted and carried it in a balanced position.				
A. Stated the rationale for lifting box in its center of gravity.				
4. Set his abdominal and arm muscles for action.				
A. Lifted the box of books.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Body Alignment, Balance and Movement for Health Workers, Part II

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Brought it close to his own line of gravity.				
5. Carried the box of books near the mid-line of the body for a period of approximately 5 minutes.				
6. Shifted the box from side to side as required during the period of support.				
A. Stated the rationale for shifting the box appropriately, i.e., relieves strain on certain sets of muscles.				
7. Placed the box on counter or chair for short periods of time during which he observes a rest period.				
A. Explained the rationale for utilizing a rest period.				
8. Completed the performance checklist as indicated by lifting and/or carrying the box for a period of time not to exceed 5 minutes.				
PUSHING AND PULLING				
1. Started the action with stable base of support.				
2. Indicated that good alignment and balance are necessary for pushing and pulling actions.				
3. Positioned himself appropriately for the desired action, observing the principles of body alignment and keeping the body erect.				
4. Positioned the feet at least 8 inches apart with one foot slightly advanced.				
5. Set his trunk and leg muscles.				
6. Leaned towards the utility cart in order to pull.				
A. Leaned away from the utility cart in order to pull.				
B. Observed principles of good body alignment during these actions, keeping the back straight and erect.				
7. Explained the rationale for leaning body weight into the load.				
8. Moved the utility cart using the large muscles of the leg and thigh.				
9. Identified these muscles, their specific location, and action (see previous performance checklist).				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Body Alignment, Balance and Movement for Health Workers, Part II

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
PIVOTING				
1. Stood with feet slightly apart, and knees slightly flexed.				
2. Explained that this allows a stable base for support for the use of the leg muscles.				
3. Set the trunk and pelvic muscles for action.				
4. Set the thigh and leg muscles.				
5. Shifted his weight to the ball of each foot.				
6. Stated that this allows him to lift his heel slightly and to pivot more easily.				
7. Pivoted or made a 90° turn on his feet.				
8. Body moved simultaneously with the feet so that there was no twisting of the lower back.				
9. Stated that the body and feet move together to prevent twisting of the back.				
A. Explained the rationale for this log-type motion, i.e., all parts of the body move a uniform distance in uniform time.				
10. Distributed weight equally on each foot following a turn.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Handwashing Technique for Medical Asepsis

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
1. Stood away from sink so as not to have clothing in contact with sink.				
2. Turned water on; adjusted to warm temperature. Kept water running during entire procedure.				
3. Wet hands.				
4. Applied soap thoroughly; got under nails and between fingers.				
5. Washed palms and backs of hands with strong frictional motion (10 rotary movements for at least 20 seconds).				
6. Washed fingers and the spaces between them, interlacing the fingers, rubbing them up and down for 10 seconds (10 strokes)				
7. Washed wrists and above wrists three or four inches, using rotary action (10-15 times).				
8. Repeated steps 4 through 7 (completion of 2-minute scrub, 120 strokes).				
9. Paid special attention to problem areas.				
10. Rinsed well; ran water from wrists to fingers (final rinse).				
11. Dried thoroughly with paper towel from wrists to fingertips.				
12. Turned off water with paper towel and discarded in receptacle.				
13. Used hand-lotion if desired.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Making Hospital Beds

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
ADJUSTMENT OF BEDS				
Adjusted the bed correctly in the following positions without errors in selection and movement of controls:				
1. Fowler's position				
2. Semi-Fowler's position				
3. Bed-making position				
4. Contour position				
5. Unoccupied bed position				
6. Hyperextension position				
7. Reverse Trendelenburg position				
8. Trendelenburg position				
MAKING AN UNOCCUPIED BED				
1. Selected and assembled all materials required before beginning to make bed.				
2. Adjusted bed to the highest position without errors in selection and use of controls.				
3. Placed mattress pad on the bed, smoothed it free of wrinkles, and positioned it properly.				
4. Placed sheets, draw-sheets, and blankets, and spread these items in the correct sequence and positioned each item correctly.				
5. Tucked each piece of bedding under the mattress neatly and made sure that each was smooth and taut.				
6. Formed all the required mitered corners smoothly and neatly.				
7. Formed a toe-pleat correctly at the foot of the top linens.				
8. Folded back the top sheet and adjusted the spread correctly in relation to the top sheet.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Making Hospital Beds

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
A. Folded covers correctly to open bed; or				
B. Pie-folded covers correctly to open bed.				
9. Handled and dressed the pillow correctly, keeping it from contact with body and clothing.				
10. Positioned pillow correctly with open end away from the door.				
11. Attached signal cord within reach of the patient.				
12. Lowered bed to lowest position and set the brakes.				
13. Adjusted siderails to "up" position.				
14. Observed good body alignment principles at all times.				
15. Was cognizant of and minimized contact between materials and reduced and/or eliminated sources of contamination as much as possible.				
16. Proceeded smoothly from one step to another without hesitation, false starts, or wasted motions.				
17. Completed a neat and correctly made bed within ___ minutes.				
MAKING AN ANESTHETIC BED				
1. Selected and assembled all materials needed prior to beginning to make the bed.				
2. Washed hands.				
3. Raised the bed to working height.				
4. Placed the mattress pad on the bed, smoothing it free of wrinkles, and securing or placing it in proper position.				
5. Placed sheets, drawsheets, blankets, and other materials in correct sequence, positioning each piece correctly.				
6. Tucked each piece under mattress correctly, making sure that each was smooth and taut.				
7. Formed all required mitered corners smoothly and neatly.				
8. Fan-folded the top bedding to the side of the bed or to the foot of the bed, or pie-folded the top bedding to one side of the bed.				

-CONTINUED-

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Making Hospital Beds

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
9. Placed the pillows correctly, either on chair or at the head of the bed in horizontal position.				
10. Handled and placed the pillow slip on pillow while keeping the pillow from contacting her uniform.				
11. Attached signal cord within reaching distance of patient.				
12. Placed the bed in correct position with siderails down, and set brake.				
13. Moved furniture to make room for stretcher.				
14. Observed principles of body alignment and proper movement at all times.				
15. Reduced and/or eliminated contact and/or contamination insofar as possible.				
16. Proceeded smoothly from one step to another in the procedure, working on one side before going to another.				
MAKING AN OCCUPIED BED				
1. Assembled and selected all materials before beginning to make the bed.				
2. Identified the patient.				
3. Washed hands.				
4. Stacked materials on chair in order of use.				
5. Raised the bed to the highest position.				
6. Placed the bath blanket correctly to cover the patient.				
7. Pulled the top covers to foot of bed without exposing patient.				
8. Removed top covers and folded them correctly.				
9. Moved mattress toward the top of the bed and straightened mattress cover.				
10. Removed bottom sheet and drawsheets on each side of the bed and folded and secured new linen, performing all operations in correct sequence.				
11. Moved patient to correct position for each step of the procedure.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Making Hospital Beds

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
12. Gave appropriate explanations, directions and assistance to the patient each time the patient was moved.				
A. Observed techniques of good body alignment when moving the patient.				
13. Removed the bath blanket from under top sheet without exposing patient.				
14. Placed sheets, drawsheets, blanket, and spread in correct sequence, positioning each piece correctly.				
15. Tucked each piece under the mattress neatly and made sure each was smooth, free of wrinkles and taut.				
16. Formed all the required mitered corners smoothly and neatly.				
17. Formed a toe-pleat correctly at the foot of the top linens.				
18. Folded back the top sheet and adjusted the spread correctly in relation to the top sheet.				
19. Removed soiled pillow case and dressed the pillow with new case, handling pillow correctly.				
20. Positioned pillow correctly with open end away from door.				
21. Placed soiled linen in laundry bag.				
22. Attached signal cord within reach of patient.				
23. Lowered bed to lowest position and set brake.				
24. Adjusted siderails to "up" position.				
25. Adjusted beds to comfortable position as requested by the patient.				
26. Arranged furniture in proper position.				
27. Examined patient in bed to see that patient was comfortable and everything in order.				
28. Proceeded smoothly from one step to another in procedure, without hesitations or false starts, or wasted motion.				
29. Completed a neat and correctly made bed within ___ minutes.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Assisting the Patient to Dress and Undress

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
GENERAL PERFORMANCE CHECKLIST				
1. Carried out procedures with good body alignment, balance, and action.				
A. Adjusted bed to working height.				
B. Maintained good alighment for self and patient.				
C. Moved patient to proximal side of bed for easier working position.				
2. Identified patient condition which limited motion.				
3. Was capable of carrying out required dressing procedure without injury or imposing discomfort or stress on patient.				
4. Maintained patient's privacy and warmth throughout the procedure.				
REMOVING THE CARDIGAN TYPE HOSPITAL GARMENT				
1. Washed hands.				
2. Approached and identified the patient.				
3. Explained the procedure about to be performed.				
4. Obtained the article of clothing that was needed.				
5. Provided privacy for the patient.				
6. Positioned patient at a comfortable working height.				
A. Supine position.				
B. Raised bed to highest position.				
C. Elevated head of bed, if not contraindicated.				
7. Pulled the top covers of the bed back being careful to insure the patient's modesty.				
8. Placed one hand under the patient's head and neck for support.				
9. With the other hand reached under the neck, unfastening the garment.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Assisting the Patient to Dress and Undress

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
10. Freed the sides of the garment from under the patient.				
11. Slipped the arms out of the sleeves.				
12. If patient's movement was restricted, removed the unaffected appendage from the garment first.				
13. Removed garment from the affected extremity, e.g., arm with intravenous tubing attached:				
A. Carefully slid the gown sleeve down the affected arm over the needle and tubing.				
B. Supported the arm throughout this procedure.				
C. Slid gown along the tubing, carefully removing the bottle of fluid from the holder.				
D. Supported the IV bottle above the level of the arm.				
E. Slipped the gown over the bottle.				
F. Replaced the bottle up to the holder.				
* This checklist may be used to record students' performance for dressing the patient in a clean hospital gown by reversing the order of the above check points.				
DRESSING IN PANTS OR OTHER GARMENTS WITH LEGS*				
1. Pulled top coverings back from the foot of the bed and over the patient's knees.				
2. Positioned patient proximally on the side of the bed so that his feet and legs could be reached without stretching.				
3. Lowered the bed to a flat working position.				
4. Gathered most of the pant-leg of the garment in one hand.				
5. Grasped the patient's distal ankle with the other hand.				
6. Guided the foot through the pant-leg.				
7. Repeated steps 4 through 6 with the other leg.				
-CONTINUED-				
* This checklist may be used for removing the pants--just reverse the order of the check points.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Assisting the Patient to Dress and Undress

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
8. Eased the pants up over the knees and thighs.				
9. Had the patient raise his buttocks and slide the pants up on each side, pulling them to the waist.				
10. If patient was unable to raise his buttocks, rolled the patient on his side towards self and pulled the pants up to the waist on that side.				
11. Rolled the patient to his proximal side and pulled the pants up to his waist on the other side.				
12. Fastened the pants at waist.				
13. Fastened the pants closing.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Baths

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
BED BATH				
1. Selected and assembled all needed materials before beginning the bed bath.				
2. Washed hands.				
3. Identified patient.				
4. Explained procedure to patient.				
5. Raised bed to working height. Used good body alignment procedures.				
6. Offered bedpan or urinal to patient.				
7. Permitted patient to give own mouth care. Removed, cleaned, and returned equipment to storage.				
A. Could describe procedure for giving mouth care to unconscious patient:				
1) Included head position.				
2) Glycerine and lemon applicator.				
3) Cleaned interior of oral cavity completely.				
4) Rinsed mouth with water or mouthwash.				
5) Dried patient's mouth.				
8. Applied bath blanket correctly.				
9. Removed and disposed of linen correctly (either folded clean linen and hung over back of chair, or disposed of soiled linen in proper container, being careful not to touch uniform).				
10. Removed patient's gown correctly, being careful not to expose patient. Kept patient covered with bath blanket.				
11. Washed and dried face using correctly folded bath-mitt.				
12. Washed and dried arms correctly.				
A. Protected bedding with towel under arm.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Baths

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Basin of water on bed.				
C. Soaked hand.				
D. Removed basin to bedside stand without spilling.				
13. Washed and dried chest using circular motions. Towel across upper chest. Bath blanket to waist.				
14. Folded bath blanket to pubis, towel across chest.				
15. Washed and dried abdomen.				
16. Exposed proximal leg.				
A. Flexed leg.				
B. Put towel lengthwise under leg.				
C. Placed bath basin on towel.				
D. Placed foot in basin.				
17. Washed legs with long, firm strokes and dried well.				
18. Washed and dried feet and removed basin.				
19. Changed water when cool: temperature at 110° to 115°F.				
20. Washed and dried back.				
21. Gave back-rub using strong friction and rotary movements. Gave special attention to bony prominences, scapula, and sacrum.				
A. Observed principles of body alignment.				
22. Washed or permitted patient to wash genital area.				
23. Helped patient to put on gown.				
24. Combed hair or provided assistance to patient as needed (mirror, comb, brush, towel covering, etc.).				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Baths

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
25. Checked nails: cleaned or cut as needed.				
26. Removed soiled items, cleaned equipment, and returned to storage.				
27. Made occupied bed using good body movement and without raising dust by shaking linens. Carried linens away from uniform.				
28. Left unit neat and tidy with bedside stand and call signal within easy reach of patient.				
29. Charted procedure.				
TUB BATH				
1. Assembled supplies and equipment for use.				
2. Checked tub and cleaned it if necessary.				
3. Washed hands.				
4. Identified patient and explained procedure to him.				
5. Assisted patient to bathroom using principles of body alignment, movement and balance for patient and self.				
6. Filled tub half full with water at 100° to 105°F.				
7. Assisted patient into tub.				
A. Observed principles of body alignment.				
8. Hung "occupied" sign on door.				
9. Checked on patient frequently.				
10. Washed and dried patient's back.				
11. Put clean gown on patient.				
12. Returned patient to bed.				
13. Gave back-rub.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Baths

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
14. Changed linen and disposed of soiled linen in designated manner.				
15. Left room neat and tidy.				
16. Returned to bathroom.				
A. Removed soiled linen and equipment.				
B. Cleaned tub.				
C. Removed "occupied" sign from door.				
17. Charted procedure.				
SITZ BATH				
1. Washed hands.				
2. Prepared equipment: filled tub one-third full of water (100° to 110°F). Hung "occupied" sign on door.				
3. Explained procedure to patient and checked identification band.				
4. Assisted patient to tub for 20 to 30 minutes. Checked frequently. Kept water warm throughout procedure.				
5. Assisted patient out of tub and in drying himself.				
6. Drained water from tub.				
7. Helped patient back to bed.				
8. Changed bed linens.				
9. Left room neat and tidy.				
10. Returned to bathroom.				
A. Removed soiled linens and equipment.				
B. Cleaned tub.				
C. Removed "occupied" sign from door.				
11. Charted procedure.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Care of the Hair

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
BRUSHING HAIR FOR ROUTINE DAILY CARE				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Assembled correct equipment.				
5. Prepared patient properly with bath blanket in place, towel over pillow, and patient's head turned away.				
6. Parted hair in center from front to back, and divided it into three sections on each side.				
7. Brushed each section individually, end sections first, holding each section correctly between index finger and thumb.				
8. Brushed each section with gentle, rapid strokes, using sufficient firmness to stimulate scalp and loosen scales and dirt.				
9. Smoothed out tangles and snarls, using comb when needed, and using cotton pad to wet hair if necessary.				
10. Performed all brushing and combing without pulling at scalp or otherwise causing discomfort to patient.				
11. Finished procedure with hair arranged neatly and symmetrically.				
12. Applied hair spray without spraying any on patient's face.				
13. Held up mirror for patient to view hair.				
14. Removed towel and disposed of it in receptacle.				
15. Removed bath blanket and restored bed linen to proper position.				
16. Removed and disposed of hair from brush and comb.				
17. Tidied up area, returning all items to their proper places.				
18. Completed procedure within time limit of ___ minutes.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

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* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Care of the Hair

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
BRAIDING HAIR				
1. Washed hands.				
2. Identified patient.				
3. Gave adequate explanation of reasons (comfort, neatness, prevents hair from getting matted).				
4. Divided hair into 3 sections on each side.				
5. Began braiding with left strand in left hand and right strand in right hand.				
6. Proceeded by crossing right and left strands alternately over center strand.				
7. Completed braiding without losing hold on strands or causing them to become partly unraveled.				
8. Exerted sufficient tension on strands to form neat braids without pulling at patient's scalp.				
9. Bound tips of braids with ribbon.				
10. Arranged braids to fall at sides of head.				
11. Produced braids that are neat and firm, without gaps between the intertwined strands.				
12. Completed procedure within time limit of ___ minutes.				
BED SHAMPOO				
1. Assembled all materials needed for shampoo.				
2. Identified patient.				
3. Explained procedure.				
4. Constructed trough with edges properly rolled.				
5. Placed chair at head of bed, protected by plastic cover, and placed pail on chair.				
6. Filled pitchers with warm water, one at 105° and the other at 115°.				
7. Placed drawsheet at head of bed to protect linen.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Care of the Hair

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
8. Prepared patient in correct position near side of bed with pillow removed, bath blanket in place, and linen folded toward foot of bed.				
9. Placed towel securely around patient's shoulders.				
10. Adjusted bed to low position, head section lowered and siderail down.				
11. Placed trough correctly under patient's head, providing it with sufficient slope for drainage into pail.				
12. Checked temperature of water before beginning shampoo; added water from 115° pitcher if necessary.				
13. Completed all preparations before beginning shampoo.				
14. Moistened patient's hair with water before applying shampoo.				
15. Applied shampoo in quantity indicated by directions on container.				
16. Worked shampoo into hair from front hairline to back of head, massaging scalp firmly with fingertips.				
17. Rinsed hair, removing all shampoo and taking care that water drained properly into trough.				
18. Repeated cycle (13-15) until hair was clean, testing for squeak after each rinse.				
19. Checked water temperature and adjusted as necessary to maintain at about 105°.				
20. Carried out procedure without getting shampoo or water on patient's eyes or face, and without undue wetting of other areas.				
21. Dried ears, neck and hair thoroughly with bath towel.				
22. Brushed hair and combed out tangles, holding strands correctly and not pulling at scalp.				
23. Held up mirror for patient to view hair.				
24. Removed towel and other materials from bed, and disposed of soiled materials.				
25. Restored linen and bed to original positions, restored pillow, and removed bath blanket, leaving patient dry and comfortable.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Care of the Hair

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
26. Removed and disposed of hair from brush and comb.				
27. Tidied up area, returning all articles to their proper places.				
28. Recorded time and method in nurse's notes.				
29. Completed procedure within time limit of ___ minutes.				
STRETCHER SHAMPOO				
1. Assembled all materials in utility room before moving patient.				
2. Identified patient.				
3. Explained procedure to patient.				
4. Placed bath blanket over patient.				
5. Fan-folded top linens to bottom of bed.				
6. Adjusted bed to low position and lowered siderail.				
7. Placed stretcher in correct position beside bed.				
8. Locked stretcher and bed wheels before moving patient.				
9. Used correct body position when moving patient, standing with body bracing stretcher tightly against bed.				
10. Directed and assisted patient in moving (head and shoulders first, then hips and legs) onto stretcher without undue strain on patient or self.				
11. Kept patient properly covered by bath blanket while moving.				
12. Secured safety belts firmly before unlocking stretcher wheels.				
13. Transported patient without bumping or jolting, pushing stretcher from head end.				
14. Placed stretcher correctly, head end toward sink, and locked wheels.				
15. Secured towel in place around patient's neck and shoulders.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Care of the Hair

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
16. Placed trough under patient's head, arranging for sufficient slope for drainage into sink.				
17. Adjusted patient's head in comfortable position, placing pillow under shoulders, if necessary.				
18. Attached spray to faucet and adjusted to obtain gentle flow of water at about 105°.				
19. Indicated readiness to proceed with shampoo at this point.				
20. Wrapped patient's hair in clean, dry towel.				
21. Removed trough, removed towel from patient's shoulders.				
22. Transported patient back to room without bumping or jolting, pushing stretcher from end end.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Special Skin Care

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
CHANGE POSITION OF PATIENT IN BODY CAST TO SUPINE POSITION				
1. Washed hands.				
2. Approached patient, identified patient.				
3. Explained procedure.				
4. Adjusted bed to working height. Checked bed linen to ascertain needs.				
5. Checked skin around cast edges for color, swelling, pain, cyanosis, and temperature.				
6. Massaged under cast edges. Checked cast for dryness; checked pressure areas, checked breathing.				
7. Removed supporting pillows and sandbags.				
8. Asked patient to assist in moving to center of bed.				
9. Held patient's top shoulder and top hip; gently rolled patient to supine position.				
10. Asked patient if he were comfortable. Added pillows, etc., to support him in correct alignment, and in a comfortable position.				
11. Tightened linen (removed wrinkles), fluffed pillows.				
12. Left patient comfortable, with call signal nearby, bedside stand in reach; offered liquids, raised siderails if indicated.				
13. Told patient when she will return.				
14. Charted actions and observations on nurse's notes.				
ASSIST ELDERLY PATIENT IN SUPINE POSITION				
1. Washed hands.				
2. Approached and identified the patient.				
3. Explained procedure.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Special Skin Care

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
4. Adjusted bed to working height; bed flat, proximal siderail down.				
5. Moved patient to proximal side of bed (shoulders and head first, then hips and legs). Maintained good body alignment for self (feet apart, knees slightly flexed, back straight).				
6. Assisted patient to turn onto side away from her (one hand on proximal shoulder, one on proximal hip).				
7. Lowered hands to bottom shoulder and hips, pulled patient gently towards her in order to stabilize patient's position.				
8. Aligned patient in good position: not lying on bottom arm; head, neck and back straight. Legs parallel, slightly flexed at knee; patient's top arm bent across abdomen or supported on hip with pillow.				
9. Flexed patient's top leg (did not let it rest on his bottom leg). Supported patient's leg with pillow (knee to foot).				
10. Flexed top arm in front of patient on bed, palm down.				
11. Placed pillow under head and neck.				
12. Inspected pressure areas (bony prominences).				
13. Massaged back.				
14. Left patient neat, tidy, relaxed; attached signal light, raised siderails and offered liquids.				
15. Told patient when to expect her to return.				
16. Charted action on nurse's notes.				
UNCONSCIOUS PATIENT (DIABETIC) WITH HANGNAILS ON LEFT HAND				
1. Completed bed bath; inspected fingernails for needed care.				
2. Detected hangnails on left hand.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Special Skin Care

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
3. Did not trim the nails or hangnails because patient is diabetic. Explained why nails are not cut on the diabetic patient without specific order from the RN or doctor.				
4. Reported promptly to charge nurse and awaited further instructions (allowed to cut nails and apply an antibiotic ointment, or requested to wait until the doctor arrives for the care).				
5. Completed bath; left patient clean, neat, and comfortable.				
6. Removed used items; disposed of them or cleaned them and returned them to proper place.				
7. Placed call signal and the bedside stand within easy reach of the patient.				
8. Raised siderails if indicated; offered fluids to the patient, and told him when she will return.				
9. Charted observations on nurse's notes.				
SKIN CARE FOR ILEOSTOMY OR COLOSTOMY PATIENTS				
1. Assembled supplies.				
2. Washed hands.				
3. Approached and identified the patient.				
4. Explained the procedure.				
5. Applied cement solvent.				
6. Permanent Bag				
A. Opened bag at bottom, drained out fecal matter without spilling.				
B. Rinsed bag with warm water without getting patient and/or bedding wet.				
C. When thoroughly rinsed, closed bottom of bag securely.				
7. Temporary Bag				
A. Applied cement solvent around edge of bag.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Special Skin Care

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Removed bag without tearing skin or spilling contents.				
C. Discarded bag in waste container.				
D. Washed area around stoma with soap and water.				
E. Patted area dry.				
F. Applied ointment around stoma using a tongue blade.				
G. Applied cement around stoma.				
H. Applied cement around the ring of the bag.				
I. Allowed cement to dry 30 to 60 seconds.				
J. Applied second coat of cement.				
K. Placed disc on skin over stoma. Pressed firmly until securely held.				
L. Sprinkled talcum powder around stoma area to prevent linens from sticking to cement area.				
M. Adjusted holding straps for bag to suit patient's comfort.				
N. Left patient neat and comfortable.				
O. Recorded procedure correctly on chart (i.e., time, color, amount, consistency, odor, etc.).				
8. Explained each step during the entire procedure.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Patient Movements and Ambulation

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
RANGE OF MOTION EXERCISES				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Moved the patient to the proximal side of bed (on the affected side).				
5. Oriented patient to the need for exercise.				
A. Keep knees flexed.				
B. Prevent contractures.				
C. Stimulate circulation, etc.				
6. Exercised affected joint by range of motion exercise, where applicable.				
A. Abduction.				
B. Adduction.				
C. Flexion.				
D. Extension.				
E. Internal rotation.				
F. External rotation.				
G. Circumduction.				
H. Hyperextension.				
7. Throughout the procedure was careful not to cause pain to patient.				
8. Supported distal and proximal ends of the limbs during the exercise.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Patient Movements and Ambulation

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
DANGLING				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Moved patient to proximal side of the bed.				
5. Adjusted bed to low position.				
A. Head rest to approximately 45 degrees.				
6. Raised patient to a sitting position:				
A. One hand on patient's proximal shoulder.				
B. One hand under patient's distal axilla.				
7. Continued supporting the shoulder and placed other hand under distal knee, swinging legs off bed while pivoting patient's body.				
8. Maintained principles of good body alignment while completing the motion.				
A. Patient movement should be slow, smooth, and steady.				
9. Dressed patient in robe and slippers.				
A. For comfort.				
B. For modesty.				
10. Fluffed pillow while patient was dangling.				
11. Removed slippers and robe when patient was ready to lie down.				
12. Returned patient to supine position.				
A. One hand on patient's proximal shoulder.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Patient Movements and Ambulation

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. One hand under patient's distal axilla.				
13. Supported patient's shoulders with one hand, and with other hand under both ankles.				
14. Swung legs up onto bed while pivoting the body.				
15. Maintained principles of good body alignment while completing the motion.				
A. Patient movement should be slow, smooth, and steady.				
ASSIST PATIENT TO WALK				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Moved the patient to the proximal side of the bed.				
5. Adjusted bed to the low position.				
6. Raised patient to a sitting position.				
A. One hand on patient's proximal shoulder.				
B. One hand under patient's distal axilla.				
7. Continued supporting the shoulder and placed other hand under distal knee, slipping legs off bed while pivoting patient's body.				
8. Assisted patient to stand at bedside.				
9. Aligned patient in good body position, correcting posture.				
10. Walked with patient:				
A. Minimal support: held patient's arm or hand.				
B. Moderate support: held patient's left hand in left hand with right hand around waist.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Patient Movements and Ambulation

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
C. Great support: obtained assistance by having one aide or health worker walk on other side of patient.				
11. The health worker maintained good body alignment and balance throughout the procedure.				
SAFEGUARDING THE FALLING PATIENT				
1. Explained the rationale for breaking the patient's fall and for not catching him.				
A. Injury to patient.				
B. Injury to self.				
C. Abrupt change in movement.				
2. As patient began to fall, worker positioned herself to the rear of patient, attempting to break fall by grasping patient under the armpits.				
3. Once contact was made, the health worker flexed her legs to lower the patient gently to the ground.				
4. Maintained the patient in a sitting or lying position on the floor.				
5. Remained with patient reassuring patient and providing warmth until required help arrived.				
6. Examined patient for possible injury.				
7. Prepared an accident report.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Mechanical Aids for Ambulation and Movement

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
TRANSFER PATIENT FROM THE BED TO THE WHEELCHAIR				
1. Obtained proper equipment.				
2. Checked equipment for proper working condition.				
A. Brakes.				
B. Wheels and tires.				
C. Upholstery.				
3. Washed hands.				
4. Identified patient.				
5. Explained procedure.				
6. Obtained assistance if required.				
7. Lowered the bed to working height.				
8. Assisted the patient to a dangling feet position, observing the principles of good body alignment.				
9. Positioned the wheelchair appropriately.				
10. Prepared the wheelchair for occupancy.				
A. Foot pegs raised.				
B. Brakes set.				
11. Assisted patient to stand, observing the principles of good body alignment.				
INSTRUCTING PATIENT IN THE PROPER TECHNIQUES OF USING THE WHEELCHAIR				
1. Obtained proper equipment.				
2. Checked the equipment for proper working condition.				
A. Brakes.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Mechanical Aids for Ambulation and Movement

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Wheels and tires.				
C. Upholstery.				
3. Washed hands.				
4. Identified the patient.				
5. Demonstrated and described the correct techniques of using the wheelchair to the patient.				
A. Proper use of brakes, setting and releasing.				
B. Positioning the footrest.				
C. Propelling the chair in a straight line.				
D. Turning corners.				
E. Passing through an ordinary doorway or one equipped with an automatic closing device.				
6. Provided the patient with an opportunity to practice techniques of propelling the wheelchair under supervision.				
7. Encouraged the patient to utilize proper techniques in manipulating the wheelchair.				
8. Charted the procedure.				
TRANSFERRING THE PATIENT FROM THE BED TO THE WALKER: ADJUSTMENT OF THE WALKER				
1. Obtained proper equipment.				
2. Checked equipment for proper working condition.				
A. Wheels and tires.				
B. Upholstery.				
3. Washed hands.				
4. Identified the patient.				
5. Explained the procedure.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Mechanical Aids for Ambulation and Movement

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
6. Obtained assistance if required.				
7. Adjusted the position of the bed if required.				
8. Positioned walker at bedside.				
9. Prepared walker for occupancy.				
A. Raised the seat.				
B. Removed the back support.				
10. Secured the walker in place with one hand and used a foot to block a rear wheel.				
11. Assisted the patient to a dangling feet position, observing the principles of good body alignment.				
12. Assisted the patient to stand, observing the principles of good body alignment.				
13. Positioned the patient in the walker.				
14. Checked and adjusted the height of the walker as required.				
A. Optimal patient position is to have the elbows flexed approximately 30 degrees.				
15. Lowered the seat and replaced the back support in the walker.				
16. Cautioned the patient to take small steps and avoid going too fast.				
17. Provided for the patient's comfort if necessary.				
18. Told the patient time of return.				
19. Charted the procedure.				
ADJUSTING CRUTCHES TO THE PROPER LENGTH AS REQUIRED BY THE PATIENT				
1. Obtained proper equipment.				
2. Checked the equipment for proper working condition.				
A. No splinters or breaks or bends.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Mechanical Aids for Ambulation and Movement

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Crutch tip in good condition.				
C. Axillary pad bar added if required.				
3. Washed hands.				
4. Identified the patient.				
5. Explained the procedure.				
6. Requested the patient to lie flat on the bed.				
7. Measured the length of crutch required.				
A. The crutch tip should be approximately 6 to 8 inches from the side of the heel.				
B. There should be approximately two fingers distance between the axillary bar and the axilla.				
C. The elbows should be flexed approximately 30 degrees.				
8. Adjusted position of the hand bar and the height of the shaft as required.				
9. Told the patient time of return for crutch-walking lesson.				
10. Charted the procedure.				
APPLYING A BRACE				
1. Washed hands.				
2. Identified patient.				
3. Reviewed the procedure with the patient.				
4. Obtained the proper brace.				
5. Positioned the patient for the procedure.				
6. Applied the brace correctly.				
A. Observed principles of body alignment for manipulating patient.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Mechanical Aids for Ambulation and Movement

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Prepared the brace for application.				
C. Positioned the brace on the patient's body.				
D. Secured the brace appropriately.				
7. Adjusted the brace for correct pressure.				
8. Checked for pressure points.				
9. Rechecked position and function of brace.				
10. Provided for patient's comfort, i.e., assisted in dressing or in moving to a chair.				
11. Reported and recorded the procedure appropriately.				
CRUTCH-WALKING: GAIT USED IN CRUTCH-WALKING				
1. Was able to identify two-, three-, and four-point gait.				
2. Was able to perform three-point gait.				
A. Conditions of use - full weight bearing on one leg, partial or no weight bearing on the other.				
3. Was able to perform four-point gait.				
A. Conditions for use - partial weight bearing on both legs.				
4. Was able to perform two-point gait.				
A. Conditions for use - partial weight bearing on both legs.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Positioning the Bed Patient

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
GENERAL POSITIONING FOR GOOD ALIGNMENT, SUPPORT AND PROTECTION				
1. Checked chart for contraindications.				
A. Removed supportive pillows.				
B. Did not slide across bedding.				
2. Washed hands.				
3. Identified patient.				
4. Explained procedure.				
5. Placed bed flat, at working level.				
6. Lowered siderails on proximal side.				
7. Moved body as a "log."				
8. Head, neck, and spine in straight line.				
9. Hips, knees, and feet straight and parallel.				
10. Pillow under head and shoulders.				
11. Placed pillow or towel at small of back.				
12. Placed feet firmly against foot board.				
13. Toes pointed upward; held in position with sandbags if necessary.				
14. Placed trochanter roll along hip and thigh.				
15. Provided for patient's safety and comfort, and left call signal and bedside stand within easy reach.				
16. Charted.				
USE OF HANDROLL				
1. Washed hands.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Positioning the Bed Patient

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
2. Identified patient.				
3. Explained procedure.				
4. Placed handroll in paralyzed hand. (Should be able to explain that it keeps fingers flexed and the thumb in opposition.)				
SEMI-FOWLER'S POSITION				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Elevated head of bed to approximately 45°, knees flexed approximately 15°.				
5. Charted.				
FOWLER'S POSITION				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Elevated head of bed to approximately 45°; legs extended.				
5. Patient in good alignment and supported.				
6. Charted.				
TRENDELENBURG POSITION				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Positioning the Bed Patient

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
4. Lowered head of bed.				
5. Elevated foot of bed (on chair, shock-blocks or hydraulic lift).				
6. Requested assistance if necessary to place bed on chair or shock-blocks.				
7. Charted.				
SIMS' POSITION				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Adjusted the bed to working height.				
5. Prepared the patient for movement.				
6. Placed the patient in Sims' position.				
A. Placed one hand on distant shoulder, the other on hip, drew the patient's body toward her, and adjusted patient's position when lying on his side.				
7. Aligned the patient's body in good position.				
8. Flexed the upper leg so that it did not rest on the lower leg.				
9. Positioned the lower arm to the rear of the patient.				
10. Supported the body for good alignment.				
A. Placed a pillow under the patient's head and neck.				
B. Placed a pillow under the uppermost leg so it was supported.				
11. Used artificial aids to reduce pressure if it was required				
12. Provided for the patient's comfort.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/7[illegible]

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Positioning the Bed Patient

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
A. Adjusted the bedding.				
B. Raised the siderails.				
C. Placed the call button in close position.				
D. Informed the patient when she would return.				
13. Charted.				
PRONE POSITION				
1. Washed hands.				
2. Identified patient.				
3. Explained procedure.				
4. Adjusted the bed to working height.				
5. Positioned the patient in the bed.				
A. Feet should be extended over the edge of mattress if possible.				
6. Turned the patient by placing one hand on proximal shoulder and the other on the hip and rolling the				
patient's body away from her. (Be sure she observed proper body alignment of both the patient and herself.)				
Siderail up.				
7. Adjusted the patient's body alignment.				
8. Used artificial aids to reduce pressure as required.				
9. Provided for patient comfort and safety; informed patient when she would return.				
10. Charted.				
SUPINE POSITION				
1. Washed hands.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Positioning the Bed Patient

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
2. Identified patient.				
3. Explained the procedure.				
4. Positioned the bed (bed is flat and at working height unless otherwise indicated).				
5. Prepared the patient for movement (removed pillows and supportive aids).				
6. Rolled the patient to a supine position; was careful to move the body as a single unit.				
7. Positioned the patient's body in good alignment.				
8. Supported the body parts as required.				
9. Used aids to release pressure on bony prominences if indicated.				
10. Adjusted bedding, positioned the call bell, and informed the patient when she would return.				
11. Charted.				
MOVING THE PATIENT TOWARD THE HEAD OF THE BED				
1. Washed hands.				
2. Identified patient.				
3. Explained the procedure.				
4. Adjusted the bed to working height.				
5. Instructed the patient on how he could assist.				
A. Flex both knees, placing the soles of his feet on the mattress.				
B. Grasp headboard with his arms.				
C. On command, to pull with his arms and push with his feet.				
6. Initiated the procedure.				
A. Supported the head.				
-CONTINUED-				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Positioning the Bed Patient

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
B. Supported the hips to assist in the movement.				
C. Coordinated the patient's efforts with her own.				
7. Provided for patient's comfort.				
A. Pillows.				
B. Aids.				
C. Good body alignment.				
D. Support.				
E. Call button.				
F. Siderails raised.				
8. Indicated when she would return.				
9. Charted.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Assist with Nutrition

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
1. Provided for elimination before the meal.				
2. Gave mouth and hand care before the meal.				
3. Positioned the patient and over-bed tray before meal tray was served.				
4. Prepared environment (tidied room, removed emesis basins, bedpans, or urinals from site).				
5. Washed hands before serving tray.				
6. Served tray without spilling contents. Matched tray label with identification band.				
7. Placed napkin under patient's chin. Prepared food.				
8. Positioned self in good body alignment (standing or sitting) to feed patient.				
9. Tested hot foods on inside of wrist.				
10. Gave moderate-sized bites of food. Alternated liquids with solids (1:3 or 4). Asked patient's preference for order of eating, i.e., salad, meat, etc.				
11. Fed slowly, giving patient ample time to eat. Carried on pleasant conversation.				
12. Assisted with elimination, oral hygiene, and face and hand care on completion of meal.				
13. Returned all dietary items to appropriate area - immediately after completion of the meal.				
14. Left patient neat, tidy, and comfortable. Attached call signal.				
15. Told patient time of return.				
16. Charted observations on practice nurse's notes.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Fluid Intake and Output

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
1. Measured and recorded intake and output in correct sequence (as indicated by time tables).				
2. Measured each output specimen correctly and entered results in ml or cc in correct column.				
A. Cleaned and stored equipment appropriately.				
3. Converted pint measurement correctly to ml or cc.				
4. Measured contents of water pitcher correctly and calculated water intake correctly--refilled as required.				
5. Calculated and entered correct totals for 2:00 to 4:00 p.m. intake (e and f) and output (a, b and c).				
6. Measured and recorded 4:30 p.m. urine specimen after calculation and entry of 2:00 and 4:00 p.m. totals.				
7. Made complete record on I and O form for 2:00 and 4:00 p.m.				
8. Completed the assignment within the time limit of 20 minutes.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71

PERFORMANCE CHECKLIST

Unit: Observing Intravenous Therapy

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
1. Dressed and undressed a patient with an IV without dislodging needle. (For additional details refer to checklist in Assisting the Patient to Dress and Undress.)				
2. Gave assistance with meals when needed. (For additional details refer to unit on nutrition.)				
3. Bathed the IV site during the bath without pain to patient or dislodging needle. (Refer to unit on baths if required.)				
4. Assisted the patient with an IV to ambulate. (Refer to unit Mechanical Aids for Ambulation and Movement if required.)				
5. Checked the safety hazards often:				
A. IV fluid level.				
B. Swelling around needle.				
C. Patient's reaction to the IV.				
D. Rate of flow.				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Assisting with Spiritual Care

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
CALLING A CLERGYMAN AT THE PATIENT'S REQUEST				
1. Looked up the name of a church of that denomination in phone book or list provided by the agency.				
2. Made the phone call and identified self.				
3. Stated the purpose of the call. (The following may be in any order.)				
A. Gave name of patient and room number.				
B. Stated name of hospital.				
C. Stated that patient will be going to surgery in two days.				
D. Stated that patient wishes to see the clergyman before surgery.				
E. Made a statement about the general condition of the patient.				
4. Obtained the name of the clergyman who will visit and the approximate time.				
5. Reported back to patient that the call had been made, name of person who will be making the call, and at what time.				
6. Recorded the activity on the nurse's notes.				
PREPARING THE PATIENT FOR THE SACRAMENT OF ANOINTING THE SICK				
1. Approached patient and explained that the priest will give the sacrament.				
2. Had the patient void and wash hands and face; assisted as needed.				
3. Cleared space for sacrament articles and placed towel as cover. Provided teaspoon and second towel if part of agency's procedure.				
4. Placed patient in comfortable position - supine or semi-Fowler's.				
5. Pulled curtain to provide for privacy.				
6. Folded back the bedcovers to expose the feet.				
7. Stood by respectfully as priest gave the sacrament.				
-CONTINUED-				

* PASS _____ FAIL _____

AHPP 10/71

* Must have 100% satisfactory performance

PERFORMANCE CHECKLIST

Unit: Assisting with Spiritual Care

Student: _____

Instructor: _____

Date: _____

	SATISFACTORY *	UNSATISFACTORY	NOT APPLICABLE	NOT OBSERVED
8. Replaced top bed covers over feet after the sacrament.				
9. Disposed of soiled linen, cleaned and returned teaspoon to proper area, and tidied room.				
10. Attended to the needs and comfort of the patient. (Asked if there was anything the patient needed.)				
11. Recorded the sacrament of anointing the sick on the patient's chart, with the time and the name of the priest.				
DISCUSSION OF SITUATIONS				
1. Jewish patient who eats kosher foods.				
A. Showed respect for other's religious beliefs in discussing alternative ways of meeting the patient's dietary needs.				
B. Might allow the patient's family to bring in some kosher prepared food (check with agency procedure).				
C. Helped patient to select foods from the menu which he could eat, such as fruits, vegetables with milk dishes at one meal, and with meat dishes at next meal, etc.				
D. Other alternatives include: having food sent in from a kosher restaurant, "meals on wheels," or commercial source.				
2. Catholic patient wearing medal to surgery.				
A. May be able to tape the medal to patient's wrist unless it would be in the area where surgery is to be done.				
B. Showed respect for other's religious beliefs in discussing alternative ways of meeting the patient's needs.				
C. Could discuss with patient other ways in which he could obtain spiritual protection - visit with priest, and taking of sacraments before surgery, etc.				
D. Other possible ways suggested by the student.				

* PASS _____ FAIL _____

* Must have 100% satisfactory performance

AHPP 10/71